

## Training Evaluation

**JOB TITLE:** \_\_\_\_\_ **COMPANY/AGENCY:** \_\_\_\_\_

**DATE:** \_\_\_\_\_ **BRANCH OFFICE:** \_\_\_\_\_

*Please check the box that most closely applies. If the particular item does not apply to you, check the N/A box.*

|   |
|---|
| 1. How would you rate the <b>overall effectiveness</b> of the training class?   |
| Excellent <input type="checkbox"/> Good <input type="checkbox"/> Average <input type="checkbox"/> Below Average <input type="checkbox"/> Poor <input type="checkbox"/> N/A <input type="checkbox"/> |
| 2. How comprehensive was the <b>content</b> of the course material?   |
| Excellent <input type="checkbox"/> Good <input type="checkbox"/> Average <input type="checkbox"/> Below Average <input type="checkbox"/> Poor <input type="checkbox"/> N/A <input type="checkbox"/> |
| 3. How did you find the <b>organization</b> of the course material to assist you in performing your job functions?  |
| Excellent <input type="checkbox"/> Good <input type="checkbox"/> Average <input type="checkbox"/> Below Average <input type="checkbox"/> Poor <input type="checkbox"/> N/A <input type="checkbox"/> |
| 4. How did you find the <b>pace</b> at which the instructor taught the course? Was the length of time allotted to the topics adequate for your needs?   |
| Excellent <input type="checkbox"/> Good <input type="checkbox"/> Average <input type="checkbox"/> Below Average <input type="checkbox"/> Poor <input type="checkbox"/> N/A <input type="checkbox"/> |
| 5. How would you rate the <b>level</b> of the material presented?   |
| Excellent <input type="checkbox"/> Good <input type="checkbox"/> Average <input type="checkbox"/> Below Average <input type="checkbox"/> Poor <input type="checkbox"/> N/A <input type="checkbox"/> |
| 6. How would you rate the <b>overall effectiveness</b> of the training and documentation materials?   |
| Excellent <input type="checkbox"/> Good <input type="checkbox"/> Average <input type="checkbox"/> Below Average <input type="checkbox"/> Poor <input type="checkbox"/> N/A <input type="checkbox"/> |
| 7. How would you describe the documentation in terms of:  |
| a) Its <b>organization</b> around the job functions that you perform?   |
| Excellent <input type="checkbox"/> Good <input type="checkbox"/> Average <input type="checkbox"/> Below Average <input type="checkbox"/> Poor <input type="checkbox"/> N/A <input type="checkbox"/> |
| b) Its clear and concise <b>appearance</b> ?  |
| Excellent <input type="checkbox"/> Good <input type="checkbox"/> Average <input type="checkbox"/> Below Average <input type="checkbox"/> Poor <input type="checkbox"/> N/A <input type="checkbox"/> |
| c) Its <b>meaningfulness and usefulness</b> ?   |
| Excellent <input type="checkbox"/> Good <input type="checkbox"/> Average <input type="checkbox"/> Below Average <input type="checkbox"/> Poor <input type="checkbox"/> N/A <input type="checkbox"/> |
| d) Its <b>thoroughness</b> ?  |
| Excellent <input type="checkbox"/> Good <input type="checkbox"/> Average <input type="checkbox"/> Below Average <input type="checkbox"/> Poor <input type="checkbox"/> N/A <input type="checkbox"/> |

*Are there any areas where you might require additional help? Include your email address so that someone can contact you.*

*Comments: (If you rated any of the above questions as Below Average or Poor, please provide comments.)*